

Return to:  
City of Concord  
Code Administration  
Health Services Division  
37 Green Street  
Concord, NH 03301  
603-225-8580



Permit #: \_\_\_\_\_

Fee: \$ \_\_\_\_\_

Make check payable to:  
**CITY OF CONCORD**

**All license applications must be submitted**  
**Forty Five (45) days prior to the proposed**  
**dates to allow for processing.**

### **APPLICATION FOR TEMPORARY PEDDLERS / VENDORS LICENSE**

Name of Applicant: \_\_\_\_\_ Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Business Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Business Address: \_\_\_\_\_

Vehicle Description: Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_

VIN: \_\_\_\_\_ Registration: \_\_\_\_\_

SEX	AGE	HEIGHT	WEIGHT	COLOR HAIR	COLOR EYES
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Products Being Sold: \_\_\_\_\_

Location for sale of goods: \_\_\_\_\_

Proposed dates of operation: From: \_\_\_\_\_ To: \_\_\_\_\_

Proposed hours of operation: From: \_\_\_\_\_ To: \_\_\_\_\_

Photograph of vehicle or stand being used: ☐ Yes ☐ No

Written permission from abutters and/or property owners: ☐ Yes ☐ No

Copy of State of NH Hawkers & Peddlers License: ☐ Yes ☐ No

Certificate of Insurance: ☐ Yes ☐ No

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved: \_\_\_\_\_ Date: \_\_\_\_\_

Health Licensing Officer

**THIS LICENSE MAY BE REVOKED ACCORDING TO CHAPTER 15, SECTION 10-12 AND 10-13 OF THE MUNICIPAL CODE OF ORDINANCES.**

**OVER FOR FEES**

### **LICENSE FEES**

1. The license fee to peddle on private property, other than from a motor vehicle or from a fixed location, not to exceed one (1) week in duration: ☐ \$53.00/week
2. The license fee to peddle from a fixed location on private property: ☐ \$29.00/day
3. The license fee for a temporary vendor's license on public property from a fixed location under the provisions of 15-8-16, Street Fairs: ☐ \$53.00/day